DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled

WAFER AND METHOD OF PRODUCING A SUBSTRATE BY TRANSFER OF A LAYER THAT INCLUDES FOREIGN SPECIES

and for which a patent application is attached.

I hereby state that I have reviewed and understand the contents of the above identified application, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

EARLIEST FOREIGN APPLI	CATION(S), IF ANY, FILE	ED PRIOR TO THE FILING DA	TE OF THE AP	PLICATION
APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	PRIORIT	Y CLAIMED
0212405	France	October 7, 2002	☑ YES	□ NO
			☐ YES	□ NO

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.

PROVISIONAL APPLICATION NUMBER	FILING DATE	

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information known to me which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

FILING DATE			
	PATENTED	PENDING	ABANDONED
	1		
		TATEMED	TATENTED TENDING

^{*} for use only when the application is assigned to a company, partnership or other organization.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Γ	FULL NAME OF	LAST NAME	FIRST NAME	MIDDLE NAME		
INVENTOR		LETERTRE	Fabrice			
ľ	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZEN	COUNTRY OF CITIZENSHIP	
l	CITIZENSHIP	Grenoble	France	France		
İ	POST OFFICE	STREET	CITY	STATE OR COUNTRY	ZIP CODE	
١	ADDRESS	33 quai Jongkind	Grenoble	France	38000	
		SIGNATURE OF INVENTOR 201		DATE		
T	FULL NAME OF	LAST NAME	FIRST NAME	MIDDLE NAME		
l	INVENTOR	LEVAILLANT	Yves	Mathieu		
ŀ	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
l	CITIZENSHIP	Crolles	France	France		
ŀ	POST OFFICE	STREET	CITY	STATE OR COUNTRY	ZIP CODE	
l	ADDRESS	271, rue Gaston Angelier	Crolles	France	38920	
		SIGNATURE OF INVENTOR 202		DATE		
Τ	FULL NAME OF	LAST NAME	FIRST NAME	MIDDLE NAME		
l	INVENTOR	JALAGUIER	Eric			
ŀ	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
l	CITIZENSHIP	Saint Martin D'uriage	France	France		
t	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY	ZIP CODE	
		33205 Chemin des Roux le Penet	Saint Martin D'uriage	France	380140	
		SIGNATURE OF INVENTOR 203		DATE		
Ī	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME		
	RESIDENCE & CITIZENSHIP	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY	ZIP CODE	
	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME		
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
	POST OFFICE ADDRESS	STREET	СІТУ	STATE OR COUNTRY	ZIP CODE	
_		SIGNATURE OF INVENTOR 205		DATE		